

CLAIMS ONLY							Application Number 10/659938		Filing Date			
							Applicant(s)					
* May be used for additional claims or amendments												
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	1						51					
2		1					52					
3		1					53					
4		1					54					
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6		1					56					
7		1					57					
8		1					58					
9		1					59					
10		1					60					
11		1					61					
12		1					62					
13		1					63					
14		1					64					
15		1					65					
16	1						66					
17		1					67					
18		1					68					
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20		1					70					
21		1					71					
22		1					72					
23		1					73					
24		1					74					
25		1					75					
26		1					76					
27		1					77					
28		1					78					
29	1						79					
30		1					80					
31		1					81					
32		1					82					
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35		1					85					
36		1					86					
37		1					87					
38		1					88					
39		1					89					
40		1					90					
41		1					91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep	3						Total Indep					
Total Depend	35						Total Depend					
Total Claims	38						Total Claims					